SCHEDULE A

Form 740-NP

42A740-NP-A Department of Revenue

➤ See instructions.



KENTUCKY SCHEDULE A
ITEMIZED DEDUCTIONS

2008

➤ Attach to Form 740-NP.

Enter name(s) as shown on Form 740-NP, page 1.					Your So	cial S	Security Nur	mber
Medical and		Do not include expenses reimbursed or paid by others.						
Dental	1.	Medical and dental expenses	1					
Expenses	2.	Enter amount from Form 740-NP, page 1, line 8 2						
	3.	Multiply the amount on line 2 by 7.5% (.075). Enter result	3					
	4.	Total medical and dental. Subtract line 3 from line 1. If zero or less, enter -0			>	4		
Taxes	5.	Local income taxes (do not include state income tax)	$\overline{}$					
шлоо	6.	Real estate taxes	6					
Note:	7.	Personal property taxes	7					
Sales and use taxes are not	8.	Other taxes (list)						
deductible.			8					
	9.	Total taxes. Add the amounts on lines 5 through 8. Enter here			>	9		
Interest	10.	Home mortgage interest and points reported to you on						
Expense		federal Form 1098	10					
•	11.	Home mortgage interest not reported to you on federal Form 1098						
		(if paid to an individual, show that person's name and address)						
Note:								
Personal			11					
interest is not		See instructions for lines 12 and 13.	F					
deductible.	12.	Points not reported to you on federal Form 1098	12					
	l	Qualified mortgage insurance premiums						
	14.		- +					
	15.	Total interest. Add the amounts on lines 10 through 14. Enter here			>	15		
Contributions	16.							
Note: For any	17.	Other than cash or check (attach federal Form 8283 if over \$500)						
contribution of \$250 or more,	18.							
see instructions.	19.	Total contributions . Add the amounts on lines 16 through 18. Enter here			>	19		\top
Casualty and	20.	Enter amount from attached federal Form 4684, Section A, line 16						
Theft Losses	21.							
	22.		22					
	23.	Total casualty or theft loss(es). Subtract line 22 from line 20. If zero or less,		· -0	>	23		\top
Job Expenses	24.							
and		etc. (attach Form 2106 or 2106-EZ if applicable) list						
Most Other			24					
Miscellaneous	25.	Tax preparation fees	25					
Deductions	l	Other (investment, safe deposit box, etc.) list	F					
			26					
	27.	Add the amounts on lines 24, 25 and 26. Enter here	27					
	28.	Enter amount from Form 740-NP, page 1, line 8 28						
	29.		29					
	30.	Total. Subtract line 29 from line 27. If zero or less, enter -0			>	30		
Other	31.	Other (see instructions)						
Miscellaneous								
Deductions					>	31		
Total Itemized								
Deductions	32.	Add the amounts on lines 4, 9, 15, 19, 23, 30 and 31. Enter here			>	32		
If the amount		Form 740-NP, page 1, line 8, exceeds \$159,950 (\$79,975 if married filing separ						
		d complete the limitation schedule on the reverse of this form; or	410 10	, , , , , , , , , , , , , , , , , , , ,	,, omp intoo			
If married fil	ing s	eparate returns, or spouse is not filing a Kentucky return, complete lines 3	3 thro	ugh 3	6 below. If			
		filing jointly, enter total deductions (line 32 above) on Form 740-NP, page 1, I						
33. Enter your	incor	ne from Form 740-NP, page 1, line 8	33					
		mbined federal Adjusted Gross Income						
35. Divide line 33 by line 34. Enter percentage								
36. Multiply line 32 by line 35. This is your portion of total itemized deductions. Enter here and								
on Form 74	<u>0-N</u> P,	page 1, line 11	<u></u>	<u></u>	>	36		

2008

42A740-NP-ME Commonwealth of Kentucky Department of Revenue

➤ Attach to Form 740-NP.

MOVING EXPENSE AND REIMBURSEMENT

Ente	r name(s) as shown on Form 740-NP, page 1.		Your Social Securit	y Number		
	Enter total Kentucky earned income (do not include moving exp	nanca raimhuraamant)	1			
	Enter total earned income from federal return (do not include n	•				
3.	Divide line 1 by line 2. Enter result. If amount is equal to or great	ater than 100%, enter 100%	3	%		
	(a) Enter moving expense reimbursement included in wages					
	(b) Subtract Form 3903, line 3, from Form 3903, line 4, and enter					
	If zero or less, enter -0					
	(c) Add lines 4(a) and 4(b) above and enter result here and on Fe	orm 740-NP, page 4, line 2, Colu	mn A.			
	This is your moving expense reimbursement for federal	4(c)				
5.	Multiply line 4(c) by line 3. Enter result here and on Form 740-N					
	This is your moving expense reimbursement for Kentucky					
	Enter moving expense deduction from federal Form 3903, line 5, here $$					
7.	Multiply line 6 by percentage on line 3. Enter here and on Form					
	This is your allowable Kentucky moving expense		7			
	INSTRUCTIONS-	-SCHEDULE ME				
expe	Year Nonresidents—If you are a full-year nonresident, moving ense reimbursements are not taxable, and moving expenses are deductible.	received from Kentucky ources while a resident o reimbursement reflecte	f Kentucky. Do			
to yo	-Year Residents—If you are a part-year resident, any payments ou or on your behalf by any employer for moving expenses are sidered income. These payments will be included in wages (box 1) will be shown separately on the wage and tax statements.	ome reported on your fec reimbursement reflecte				
requ they	ons who were residents of Kentucky for only part of the year are lired to report as income only part of the total reimbursement received. The amount which must be reported to Kentucky as me is based on the percentage of Kentucky earned income to		mbursement included in wages			
tota	I earned income.	Line 4(b)—Subtract federal Foliage 1. Subtract federal		eral Form 3903		
rece etc.	the computation of this percentage, earned income is income you ived for services you provided. It includes wages, salaries, tips, It also includes income earned from self-employment (Schedules -EZ and F and partnerships).	Line 4(c) — Add lines 4(a) and Form 740-NP, page 4, line 2, (reimbursement for federal or	Column A. This is your m			
740	MIZED DEDUCTIONS LIMITATION SCHEDULE—Use th -NP, page 1, line 8, exceeds \$159,950 (\$79,975 if marrie	ed filing separate returns).				
	fmarried filing separate returns but combining itemized deducti Form 740-NP, page 1, line 8) to joint or combined federal adjuste		the percent of your sep	parate income		
• 11	f single, married filing a joint return or married filing separate So	chedules A, enter 100%.	%			
1	Multiply the amount on Schedule A, line 32, by the percent of ir	ncome shown above	1			
	Add the amounts on Schedule A, lines 4, 14 and 23, plus any ga and multiply by the percent of income shown above	ambling losses included on line	e 31			
	Note: Be sure your total gambling losses are clearly identified of	on line 31.				
3.	Subtract the amount on line 2 from the amount on line 1. (If the					
	the amount from line 1 above on Form 740-NP, page 1, line 11.).		3			
4.	Multiply the amount on line 3 above by 80% (.80) Enter the amount from Form 740-NP, page 1, line 8	4				
5. 6	Enter \$159,950 (\$79,975 if married filing separate returns)	5				
	Subtract the amount on line 6 from the amount on line 5. (If the					
	is zero or less. STOP HERE: enter the amount from line 1 above	on				
_	Form 740-NP, page 1, line 11.)					
	Multiply the amount on line 7 above by 3% (.03)	8				
	Compare the amounts on lines 4 and 8 above. Enter the smalle					
	Divide line 9 by 1.5					
11.	Subtract line 10 from line 9		11			

12. Total itemized deductions. Subtract the amount on line 11 from the amount on line 1. Enter the result